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(to be used for all correspondence after initial filing)

Attorney Docket No	CE11436JME (9640/131)
Application Number	10/630,408
Filing Date	JULY 30, 2003
First Named Inventor	HABIB A. AMIRZADEH
Group Art Unit	2675
Examiner	XIAO, KE

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ENCLOSURES (check all that apply)

☒ Response to Office Action Dated November 4, 2004
- ☐ After Final
- ☐ Affidavits/declaration(s)

☐ Status Letter

☐ Extension of Time Request (duplic)

☐ Express Abandonment Request

☐ Information Disclosure Statement, PTO-1449, art

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/ Incomplete Application

☐ Assignment Papers (for an Application)

☐ Drawings

☐ After Allowance Communication to Group

☐ Petition Routing Slip (PTO/SB/69) and Accompanying Petition

☐ To Convert a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Small Entity Statement

☐ Request of Refund

☐ Appeal Communication to Board of Appeals and Interferences

☐ Notice of Appeal

☐ Proprietary Information

☐ Post Card Receipt

☐ Additional Enclosure(s) (please identify below).

☐

☐

☐

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No 50-1713 A duplicate copy of this sheet is enclosed

☒ I hereby petition under 37 CFR § 1 136(a) for any extension of time required to ensure that this paper is timely filed Please charge any unassociated fees which have not otherwise been paid to Deposit Account No 50-1713 A duplicate copy of this sheet is enclosed

CALCULATION OF FEE

	Claims After Amendment		Highest No Previously Paid For	Present Extra	Small Entity Rate	Add'l Fee	or	Large Entity Rate	Add'l Fee
Total	22	Minus	21	1	x $25=	0		1x $50=	50
Indep		Minus		0	x $100=	0		x $200=	
First Presentation of Multiple Dep. Claim					+$180=	—		+ $360=	
					total add'l fee	$ 0		total add'l fee	$ 50

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or individual name	FRANK C. NICHOLAS Registration No 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature		Date	January 5, 2005

DIGGS 00000001 501713 10630408

03/09/2005

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CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to (703) 872-9314 to the U.S Patent and Trademark Office on this date:

January 5, 2005

Signature	FRANK C. NICHOLAS (33,983)	Date	January 5, 2005

10/630408

	Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

96440/131

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	21	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	21 minus 20=	* 1
INDEPENDENT CLAIMS	3 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X$ 9=		OR	X$18=	18
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	768

CLAIMS AS AMENDED - PART II

01-05-05

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 22	Minus	** 21	= 1
Independent	* 3	Minus	*** 3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18= 50	50
X42=		OR	X84=	0
+140=		OR	+280=	0
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	50

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.